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APPLICANTS

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**\*\* CONTINUING DATA \*\*\*\*\***  
 This application is a CIP of 09/693,115 10/20/2000 ABN \* *CS*  
 and is a CIP of 09/518,041 03/02/2000 *CS*  
 and is a CIP of 09/590,925 06/09/2000 PAT 6,817,028 *CS*  
 (\*)Data provided by applicant is not consistent with PTO records.

**\*\* FOREIGN APPLICATIONS \*\*\*\*\***

IF REQUIRED, FOREIGN FILING LICENSE GRANTED  
**\*\* 08/17/2001**

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after met Verified and Acknowledged	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after met Allowance <i>Chen</i> Examiner's Signature <i>CS</i> Initials	STATE OR COUNTRY GA	SHEETS DRAWING 31	TOTAL CLAIMS 54	INDEPENDENT CLAIMS 4
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ADDRESS  
 05642  
 SCIENTIFIC-ATLANTA, INC.  
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 LAWRENCEVILLE, GA  
 30044

TITLE  
 Interactive program guide configuration system

<input type="checkbox"/> All Fees
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FILING FEE  RECEIVED 1402	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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